

Name: \_\_\_\_\_  
Last First

ID: \_\_\_\_\_

# Andrews University

## ADVANCEMENT TO CANDIDACY Master's Program

College: \_\_\_\_\_  
Degree: \_\_\_\_\_  
Anticipated Grad. Date: \_\_\_\_\_

Department: \_\_\_\_\_  
Emphasis: \_\_\_\_\_  
Bulletin: \_\_\_\_\_

**Must have REGULAR status and have filed application for graduation first!**

### 1. RECORDS OFFICE

Application for graduation

\_\_\_\_\_ Records Office

\_\_\_\_\_ Date

### 2. PROGRAM REQUIREMENTS (To be filled in by the department)

Required credits: \_\_\_\_\_

Minimum 500 & above: \_\_\_\_\_

Language:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Comprehensive:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>
Teaching Certificate:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Thesis:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>
Department Requirement:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Portfolio	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>
Recital	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Project(s):	No	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>

\_\_\_\_\_ Department Chair/Program Director

\_\_\_\_\_ Date

### 3. COURSE REQUIREMENTS: (from attached check sheet)

#### GRADUATE CREDITS

	400-499		>500		Total
Completed: Transfer	_____	+	_____		_____
AU	_____	+	_____		_____
Proposed: Transfer	_____	+	_____		_____
AU	_____	+	_____		_____
Totals	_____	+	_____		_____

Tour/Workshop: \_\_\_\_\_

Independent Study: \_\_\_\_\_

Total: \_\_\_\_\_

**Note: All transfer courses must be approved by petition and an official transcript on file in Records Office.**

\_\_\_\_\_ Academic Advisor

\_\_\_\_\_ Date

### 4. GRADUATE SCHOOL

Regular Status:

Meets Requirements:

Graduate GPA: \_\_\_\_\_

Transfer meets requirements:

All bulletin requirements met or petitioned:

\_\_\_\_\_ School of Graduate Studies

\_\_\_\_\_ Date

### 5. APPROVAL

\_\_\_\_\_ College Dean /Graduate Program Coordinator

\_\_\_\_\_ Date Granted

Name: \_\_\_\_\_  
Last First

ID: \_\_\_\_\_



**CANDIDACY COURSE CHECK SHEET**  
 Master's Program

School: \_\_\_\_\_  
 Degree: \_\_\_\_\_  
 Anticipated Grad. Date: \_\_\_\_\_

Department: \_\_\_\_\_  
 Emphasis: \_\_\_\_\_  
 Bulletin: \_\_\_\_\_

**COURSES IN GRADUATE PROGRAM (list course completed first and in order taken)**

Term taken or to be taken	Course Acronym & #	Course Title	Swing credits	> 500 credits	grade	code

Totals: \_\_\_\_\_  
 Total Credits: \_\_\_\_\_

Tour/Workshop Credit: \_\_\_\_\_ Independent Study/Readings: \_\_\_\_\_

Code: T = Transfer    W = Tour/Workshop    I = Independent Study    P = Project  
 X = Exception or replacement by petition

\_\_\_\_\_  
 Academic Advisor

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 For MAT only: Content Advisor

\_\_\_\_\_  
 Date